

COMMONWEALTH of VIRGINIA

Department of Medical Assistance Services

February 26, 2001

SUITE 1300 600 EAST BROAD STREET RICHMOND, VA 23219 804/786-7933 804/225-4512 (Fax) 800/343-0634 (TDD)

Dear Provider:

The purpose of this letter is to clarify two issues: (1) authorization of respite hours; and (2) approvals of increases in services for individuals who are already receiving services from the Mental Retardation Waiver.

Respite:

As of January 1, 2001, Respite hours will be authorized per calendar year rather than a year from the date that the request was made. This means that all authorizations will run from January through December of a given year. All recipients who had a Respite authorization crossing into the calendar year 2001 automatically received a renewal of Respite from January 1, 2001 through December 31, 2001. This renewal was for the full 720 respite hours. The automatic renewal was only for recipients who had an authorization that crossed into the year 2001. For example: under the former method, the individual had been authorized for 720 hours of respite from October 1, 2000 through September 30, 2001. This individual had the hours automatically reset to give 720 hours of respite beginning January 1, 2001 through December 31, 2001. However, if the respite hours authorized were from November 15, 1999 through November 14, 2000, there was no automatic renewal of respite hours. You may request Respite at any point during the year and the hours will run from the date of the approved request through December 31, 2001.

Effective January 1, 2001 there will no longer be a daily or per diem rate for Respite Care. Providers must bill for Respite on an hourly basis, which will ensure that providers are paid for all of the Respite Care that they provide as well as assure that allowable limits are not exceeded. Prior to this change, providers could not bill for hours of care provided in excess of 13 per 24-hour day, even though the care was appropriate and provided.

The Prior Authorization (PA) notification that you will receive will have authorization for procedure "RESPI". Bill as you always have, using the appropriate code that is relevant to which program the individual participates and what level of respite is provided. The codes for each program are as follows:

Mental Retardation Waiver:

Z9421-procedure code for Respite provided by an aide

Provider Letter February 20, 2001 Page Two

Elderly and Disabled Waiver:

Z9421-procedure code for Respite provided by an aide

Z9423-procedure code for Respite provided by a nurse

Z9425-procedure code for Congregate Respite provided by an aide

Z9408-procedure code for Congregate Respite provided by a nurse

Technology Assisted Waiver:

Z9403-procedure code for Respite provided by a registered nurse Z9404-procedure code for Respite provided by a licensed practical nurse

AIDS Waiver:

Z9403-procedure code for Respite provided by a registered nurse

Z9404-procedure code for Respite provided by a licensed practical nurse

Z9407-procedure code for Congregate Respite provided by a registered nurse

Z9408-procedure code for Congregate Respite provided by a licensed practical nurse

Z9421-procedure code for Respite provided by an aide

Z9425-procedure code for Congregate Respite provided by an aide

Increases in Plans of Care for individuals receiving services from the Mental Retardation Waiver

This is to make sure there is no confusion about how to request increases in services for individuals who are currently receiving services from the Mental Retardation Waiver. The standard for individuals who are already receiving Waiver services is based on whether the additional services are needed to ensure the individual's health and safety while avoiding institutionalization. While this has been the standard under which the cases were reviewed at the state level, this standard may not have been clearly articulated in previous communications to CSBs. If you have not recommended increases in services because you thought that these individuals had to meet the emergency criteria, you may resubmit those cases for review. They are to be submitted to your Regional Consultant with the Department of Mental Health, Mental Retardation and Substance Abuse Services.

Should you have any further questions, please contact the DMAS Waiver Services Unit at (804) 786-1465.

Sincerely,

C. Mack Brankley Acting Director

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